

**RECEIVED
CENTRAL FAX CENTER****NOV 22 2005**

Attorney Docket: 3324.1 (01US2)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: James W. Overbeck et al. Examiner: <not yet assigned>
Serial No: 10/779,482 Art Unit:
Filed: February 14, 2004
For: DEPOSITING FLUID SPECIMENS ON SUBSTRATES, RESULTING
ORDERED ARRAYS, TECHNIQUES FOR DEPOSITION OF ARRAYS

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the enclosed total of 2 pages including a cover sheet is being facsimile transmitted to the fax number: 571-273-8300, in the above-referenced application, to the Patent and Trademark Office on the date shown below.

Typed or Printed Name of Person: Ivan D. Zitkovsky, Reg. No. 37,482

Date: Nov. 22, 2005Signing Certification **CHANGE OF CORRESPONDENCE ADDRESS**

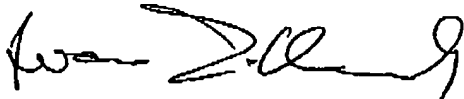
Regarding the above-captioned application, please change the correspondence address to:

CUSTOMER NUMBER: 33743

Applicant submits herewith the completed Change of Correspondence Address PTO/SB122 Form. Together with the communication dated July 26, 2005, the PTO likely inadvertently changed the correspondence address. This change of address restores the original correspondence address for the above-captioned application

Please charge all PTO fees and apply or credits to the deposit account 01-0431.

Respectfully submitted,



Ivan D. Zitkovsky, Reg. No. 37,482
6 Freeman Circle
Lexington, MA 02421-7713

Tel. +781-274-9960 (or 274-8064)
Fax +781-274-6696

NOV 22 2005

PTO/SB/122 (04-05)

Approved for use through 07/31/2006. OMB 0851-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/779,482
	Filing Date	Feb. 14, 2004
	First Named Inventor	James W. OVERBECK
	Art Unit	1743
	Examiner Name	
	Attorney Docket Number	3324.1A

Please change the Correspondence Address for the above-identified patent application to:

☒ The address associated with Customer Number: 33743

OR

☐ Firm or Individual Name

Address

City State Zip

Country

Telephone Email

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

☐ Applicant/Inventor

☐ Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or agent of record. Registration Number 37,482

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature Ivan David ZITKOVSKY

Typed or Printed Name IVAN DAVID ZITKOVSKY

Date NOV. 22, 2005 Telephone 781-274-6690

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.